

# AFFIDAVIT OF ELIGIBILITY

## **Instructions**

*On the first line, **print** your name*

On the *second line*, state the name of the office sought. List the county, city, school district or other jurisdiction of the position sought, except for state offices.

### **Examples:**

- Alderman, City of Bigtown;
- Littletown School District Board of Directors;
- Razorback County Justice of the Peace
- State Representative
- Constable of Mudpuddle Township

*On the third line, if applicable, state the district, ward or zone of the position sought.*

### **Examples:**

- An alderman candidate for Bigtown Ward 1 would state “Ward 1” on this line;
- A Littletown School board candidate for zone 1 (some, but not all, school districts elect their board members by zone) would state “Zone 1” on this line;
- A JP candidate for district 1 would state “District 1” on this line.

*On the fourth line state the position number, if applicable, or any other identifying information.*

### **Examples:**

- A candidate for Bigtown Alderman Ward 2, Position 1 would state “1”;
- A candidate for Littletown School District Board of Directors position 2 would state “2”;
- A candidate for Littletown School district at-large position 1 (if there is a combination of zone and multiple at-large seats) would state “1”;
- A candidate for State Representative District 52 would state “52”;
- If the position number is not known or cannot be determined the position can be identified by, for instance, naming the incumbent or providing other information.

*Sign your name in the space provided.*

*Write the address of your residence in the space provided.*

*Have the affidavit verified by a notary public or other officer authorized to administer oaths.*

**Candidates for school board, independent candidates for municipal offices and independent and write-in candidates for state, United States House and Senate seats, county and township offices *must* file an affidavit of eligibility with the county clerk. Not required for nonpartisan judicial candidates.**

## AFFIDAVIT OF ELIGIBILITY

*My name is (print)* \_\_\_\_\_

*I am eligible to hold the following office if elected:*

Office \_\_\_\_\_

District/Ward/Zone/ (if applicable) \_\_\_\_\_

Position Number or other description of position (if applicable) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of Candidate**

\_\_\_\_\_  
**Residence Address of Candidate (Street)**

\_\_\_\_\_  
**City, State, Zip Code**

*State of Arkansas*

*County of* \_\_\_\_\_

**Subscribed and sworn to me this** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_ .

\_\_\_\_\_  
**Notary Public (or other authorized officer)**

**My commission expires:** \_\_\_\_\_